

2011 JUL 19 PM 12:10

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

AMERICAN ASSOCIATION OF CLINICAL ENDOCRINOLOGISTS INC. PAC-AACEPAC

ADDRESS (number and street)

245 RIVERSIDE AVE-SUITE 200



Check if different
than previously
reported. (ACC)

JACKSONVILLE

FL

32202-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00363865

3. IS THIS
REPORT

☒ NEW
(N)

OR

☐ AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:

☐ Feb 20 (M2)

☐ May 20 (M5)

☐ Aug 20 (M8)

☐ Nov 20 (M11)
(Non-Election
Year Only)

☐ Mar 20 (M3)

☐ Jun 20 (M6)

☐ Sep 20 (M9)

☐ Dec 20 (M12)
(Non-Election
Year Only)

☐ Apr 20 (M4)

☐ Jul 20 (M7)

☐ Oct 20 (M10)

☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

Primary (12P)

General (12G)

☐ Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the
State of

(d) 30-Day

POST-Election

Report for the:

General (30G)

Runoff (30R)

☐ Special (30S)

Election on

in the
State of

5. Covering Period

01 01 2011

through

06 30 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

DONALD C. JONES, ASST TREASURER

Signature of Treasurer

Donald C. Jones, ASST TREASURER

Date

07 13 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN ASSOCIATION OF CLINICAL ENDOCRINOLOGISTS, INC - AACEPAC

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2011

To:

MM / DD / YYYY
06 / 30 / 2011

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1, 2011

7,702.45

(b) Cash on Hand at
Beginning of Reporting Period.....

7,702.45

(c) Total Receipts (from Line 19)

6,850.00

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

14,552.45

7. Total Disbursements (from Line 31)

0.00

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

14,552.45

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Association of Clinical Endocrinologists, Inc. - AACEPAC

Report Covering the Period: From:

01 / 01 / 2011

To:

06 / 30 / 2011

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

3,500.00

3,500.00

(ii) Unitemized.....

3,350.00

3,350.00

(iii) TOTAL (add

6,850.00

6,850.00

Lines 11(a)(i) and (ii).....▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

6,850.00

6,850.00

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

6,850.00

6,850.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

6,850.00

6,850.00

1

1

COLUMN B
Calendar Year-to-Date

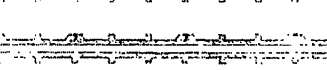
-
- A handwritten musical score for the song 'The Rose Tree'. The score is written on four staves. The first staff is a treble clef with a key signature of one sharp (F#). The second staff is a bass clef. The third and fourth staves are also treble clefs. The music is written in a simple, handwritten style. The lyrics 'The Rose Tree' are written below the first staff. The score is enclosed in a rectangular box.
- The Rose Tree

-
- The image shows a page from a musical manuscript. It contains two staves of music, one for the treble clef and one for the bass clef. The notation includes various note values, rests, and dynamic markings such as 'p' (piano) and 'f' (forte). The paper is aged and shows some wear, with a dark border around the edges.

-

-

- [The page contains faint, illegible markings or bleed-through from the reverse side.]*

- 
- 0:00

- 0.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- **penditures**

COLUMN A **Total This Period**

COLUMN B **Calendar Year-to-Date**

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))▶
- 37. Offsets to Operating Expenditures
(from Line 15, page 3).....
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)▶

6	8	5	0.00
6	8	5	0.00

6	8	5	0.00
6	8	5	0.00

11030632599

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE	OF
<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15
<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Association of Clinical Endocrinologists, Inc. - AACEPAC

Full Name (Last, First, Middle Initial) A. Leddy, Anne L.		Date of Receipt MM / DD / YYYY 04 / 14 / 2011
Mailing Address 704 Thimble Shoals Blvd., Suite 300A		Amount of Each Receipt this Period 250.00
City Newport News	State VA	
Zip Code 23606-4544		
FEC ID number of contributing federal political committee. C		
Name of Employer Tidewater Physicians Multispecialty Group		Occupation Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) B. Hamilton, Carlos, R., Jr.		Date of Receipt MM / DD / YYYY 02 / 02 / 2011
Mailing Address 7000 Fannin Street, Suite 1535		Amount of Each Receipt this Period 250.00
City Houston	State TX	
Zip Code 77030		
FEC ID number of contributing federal political committee. C		
Name of Employer University of Texas Health Science Center		Occupation Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) C. Bergman, Donald A.		Date of Receipt MM / DD / YYYY 02 / 19 / 2011
Mailing Address 1199 Park Avenue, Suite 1F		Amount of Each Receipt this Period 250.00
City New York	State NY	
Zip Code 10128-1713		
FEC ID number of contributing federal political committee. C		
Name of Employer Mt. Sinai Sch. Med.		Occupation Physician
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

11030632600

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 4

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Association of Clinical Endocrinologists, Inc. - AACEPAC

Full Name (Last, First, Middle Initial)

A. Orzeck, Eric, A.

Mailing Address

10023 S Main Street C4

City

Houston

State

TX

Zip Code

77025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Diabetes Resource Center

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 14 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Caldarella, Felice, A.

Mailing Address

9100 Wescott Drive, Suite 101

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hunterdon Health Care

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 22 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Grunberger, George

Mailing Address

43494 Woodward Avenue, Suite 208

City

Bloomfield Hills

State

MI

Zip Code

48302-5054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Grunberger Diabetes Institute

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 22 / 2011

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 4

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)

American Association of Clinical Endocrinologists, Inc. - AACEPAC

Full Name (Last, First, Middle Initial)

A. Leffert, Jonathan, D.

Mailing Address North Texas Endocrine Center
9301 N. Central Expressway, Suite 570

City Dallas State TX Zip Code 75231-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer North Texas Endocrine Center
Occupation Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 16 / 2011

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Johnson, Marina

Mailing Address IPEM
433 E. Las Colinas Blvd., Suite 900

City Irving State TX Zip Code 75039

FEC ID number of contributing
federal political committee.

C

Name of Employer IPEM
Occupation Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 20 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Lal, Padma

Mailing Address 1000 East Genesee St. Suite 400

City Syracuse State NY Zip Code 13210-1683

FEC ID number of contributing
federal political committee.

C

Name of Employer Bascik Kohn and Lal MDs
Occupation Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 28 / 2011

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **4** OF **4**

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American Association of Clinical Endocrinologists, Inc. - AACEPAC

Full Name (Last, First, Middle Initial)

A. Fink, Raymond, I.

Mailing Address

8851 Center Drive, Suite 404

City

La Mesa

State

CA

Zip Code

91942-3063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Diabetes & Endocrine Associates

Occupation

Physician

Receipt For:

☐ Primary
☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 27 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Haas, Richard, A.

Mailing Address

200 Lincoln St.

City

Worcester

State

MA

Zip Code

01605-2528

FEC ID number of contributing
federal political committee.

C

Name of Employer

UMass Memorial Medical Center

Occupation

Physician

Receipt For:

☐ Primary
☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 10 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Berkson, Richard, A.

Mailing Address

1868 Pacific Avenue

City

Long Beach

State

CA

Zip Code

90806-6113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pro Health Partners

Occupation

Physician

Receipt For:

☐ Primary
☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 07 / 2011

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00
3500.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked

☒ USPS Registered/Certified Postmarked (R/C)
7/14/11

☐ USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked


PREPARER
(3/2005)

7/19/11
DATE PREPARED

11030632604